

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS                | ID NO.                   | DATE                             |
|---------------------------|-------------------------|--------------------------|----------------------------------|
| FEE DETERMINATION         |                         |                          |                                  |
| O.I.P.E. CLASSIFIER       |                         |                          |                                  |
| FORMALITY REVIEW          | <i>RL</i>               | <i>602</i>               | <i>5-12-01</i>                   |
| RESPONSE FORMALITY REVIEW | <i>YPM</i><br><i>SK</i> | <i>657</i><br><i>809</i> | <i>5/14/01</i><br><i>7-25-01</i> |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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RES-70553  
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 11/2